PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE MAR 0 2 7007

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be sed for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. maintenance fee notifications

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21395

7590

01/09/2007

LOUIS WOO LAW OFFICE OF LOUIS WOO 717 NORTH FAYETTE STREET **ALEXANDRIA, VA 22314**

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

	•
(Signature)	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/649,837	08/28/2003	Marius Hauri	0100/0149	6648

TITLE OF INVENTION: NEEDLE PROTECTION ASSEMBLY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/09/2007	
EXAM	MINER	ART UNIT	CLASS-SUBCLASS	03/06/2007 MA	HMED2 00000020 100	649837	
WITCZAK,	CATHERINE	3767	604-110000	01 FC:1501 02 FC:1504		1499.00 OP	
1. Change of correspond CFR 1.363).	lence address or indication	n of "Fee Address" (37	2. For printing on the p	atent fro b3 p ff(:8801	Louis	W36-60 OP	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		inge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	I THE PATENT (print or type				
			data will appear on the part of a substitute for filing an	•	dentified below, the doc	ument has been filed fo	
(A) NAME OF ASSI				and STATE OR COUNT			
SMITHS M	EDICAL ASD,	INC.	KEENE, N	EW HAMPSHIRE			
Please check the appropr	riate assignce category of	categories (will not be pr	rinted on the patent):	Individual 🔀 Corporati	ion or other private group	entity Governmen	
4a. The following fec(s) Issue Fee	are submitted:	· 41	D. Payment of Fec(s): (Plea	se first reapply any prev	viously paid issue fee sh	own above)	
	No small entity discount	permitted)	☑ № Payment by credit card. Form PTO-2038 is attached.				
Advance Order -	# of Copies10		The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0501 (enclose an extra copy of this form).				
5. Change in Entity Sta	itus (from status indicate	d above)					
a. Applicant claim	ns SMALL ENTITY state	is. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL EN	ΓΙΤΥ status. See 37 CFR	1.27(g)(2).	
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than the Office.	he applicant; a registered	attorney or agent; or the	assignee or other party in	
Authorized Signature	-6			DateMarc	ch 2, 2007		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name

Louis Woo

31,730

Registration No.